

What is claimed is:

1. A system for processing partial claim data related to provision of healthcare to a patient, comprising:

5 an interface processor for receiving data representing a partial claim for reimbursement for services provided to a patient;

a pre-processor for processing said data representing said partial claim to identify deficiencies in said partial claim, said processing including:

applying rules to said data representing said partial claim to identify errors in said partial claim, and

10 determining a subset of said errors attributable to at least one of, (a) an invalid data item and (b) an incomplete data item, in said partial claim representative data; and

a result processor, for initiating generation of an alert message identifying said subset of said errors to a user.

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2. A system according to claim 1, wherein said pre-processor determines said subset of said errors by at least one of, (a) determining a data item necessary for claim submission and determinable from said partial claim representative data is missing and (b) a data item field contains an entry when it
20 should be blank.

3. A system according to claim 1, wherein said pre-processor determines said subset of said errors using predetermined data conditions and

by determining data conditions that are not satisfied by at least one of, (a) an individual data and (b) multiple data items, in said partial claim.

4. A system according to claim 1, wherein said rules are rules used to
5 process data representing completed claims.

5. A system for processing partial claim data related to provision of healthcare to a patient, comprising:

10 a claim data collator for receiving and collating data related to a partial claim for a particular patient, said partial claim data being received from a data collection system;

a source of rules for use in processing collated claim data of a partial claim;

15 a pre-processor for submitting said collated claim data of said partial claim for processing using said rules to identify deficiencies in said collated claim data of said partial claim; and

a result processor, for initiating generation of an alert message identifying said deficiencies to a user of said data collection system and enabling said user to potentially correct said deficiencies.

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6. A system according to claim 5, wherein said pre-processor determines whether said collated claim data of said partial claim is in condition for processing to initiate generation of a payment in response to completion of said partial claim.

7. A system according to claim 5, wherein said system automatically processes said partial claim data and initiates generation of said alert message identifying said deficiencies to said user during user collection of information from a patient using said data collection system enabling a user to correct said deficiencies before a collection session terminates.

8. A system according to claim 5, wherein said system automatically processes said partial claim data and initiates generation of said alert message substantially in real-time.

9. A system according to claim 5, wherein said pre-processor identifies at least one of, (a) blank data items and (b) valued data items, present in said partial claim.

10. A system according to claim 5, wherein said pre-processor determines a subset of said rules in said rules source relevant to said partial claim and processes said collated claim data of said partial claim using said subset of rules to identify deficiencies in said collated claim data of said partial claim.

11. A system according to claim 10, wherein said pre-processor determines a subset of said rules in said rules source relevant to said partial claim based on at least one of, (a) identified valued data items present in said partial claim and (b) a map linking particular rules of said rules source with particular items of claim data.

12. A system according to claim 11, further comprising a maintenance user interface, the maintenance user interface permitting a user of the system to monitor and modify rules employed by the claim preprocessor.

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13. A system according to claim 12, wherein the map is a dedicated database appropriate for use during specified interactions with a provider of claim data.

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14. A system for verifying partial claim data, comprising:

a first map respectively associating partial claim data items with a set of verification rules;

an interface processor for receiving a set of partial claim data; and

a claims processor, responsive to the received set of partial claim data

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and the first map, for applying the associated verification rules to the received set of partial claim data.

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15. A system according to claim 14, further comprising a second map for identifying data present in the set of partial claim data that is available for the application of any verification rule.

16. A system according to claim 15, wherein the second map identifies data present in the set of partial claim data that is available for validating other data items.

5 17. A system according to claim 16, further comprising a rules list creator, for creating a list of rules to be applied by the claims processor to the received set of partial claim data.

10 18. A method for enabling a provider of reimbursable services to automatically identify invalid data present in partial claim data sets needed to complete a claim for reimbursement submitted to a payer, comprising the steps of:

receiving partial claim data pertaining to provision of reimbursable services to an individual;

15 creating a map containing data that associates:

(a) respective data items present within the received partial claim data; and

(b) a set of one or more payer specified reimbursement rules; and

20 conditioning a claims processor to apply to the received partial claim data the associated payer specified reimbursement rules as specified by the map and to identify data not complying with the applied rules as invalid.

19. A method according to claim 18, further comprising the steps of:

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creating a list of invalid data identified as a result of applying payer specified rules to the received partial claim data;

forwarding the list to a user designated by a provider of the reimbursable service; and

5 prompting the user to correct an error causing the partial claim data to be identified as invalid without significant delay.

20. A method according to claim 19, further comprising the step of
automatically transmitting to the payer valid data needed to complete the claim
10 when sets of partial data have been inspected and no data remains identified as invalid.